



Docket No.: PF383D1
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Young et al.

Application No.: 10/609,370

Confirmation No.: 4500

Filed: July 1, 2003

Art Unit: 1653

For: Heregulin-like Factor

Examiner: K. Canella

TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

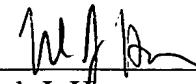
Sir:

In accordance with the Notice entitled "Pre-Grant Publication Helpful Hint", 1251 OG 54, October 9, 2001, the above identified application was filed with a new, clean copy of the specification and claims incorporating amendments made during prosecution of the parent application (App. No. 09/097,681), as well as other amendments that do not add new matter. As a convenience to the Examiner, please find enclosed a marked-up copy of the specification and claims showing these amendments as made in the present specification. Amendments in the marked-up copy are indicated by strikethrough text showing text deleted and bold, underlined text showing text inserted.

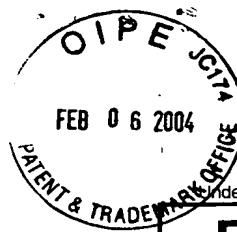
No fee is believed due for this response. However, in the event a fee is required, the Commissioner is hereby authorized to charge such fee to Applicants Deposit Account No. 08-3425. A Fee Transmittal is enclosed.

Dated: February 6, 2004

Respectfully submitted,

By 
Mark J. Hyman

Registration No.: 46,789
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FEB 06 2004

PTO/SB/17 (10-03)

Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003, Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 0.00)

Complete if Known

Application Number	10/609,370-Conf. #4500
Filing Date	July 1, 2003
First Named Inventor	Paul E. Young
Examiner Name	K. Canella
Art Unit	1653
Attorney Docket No.	PF383D1

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

Deposit Account:

Deposit Account Number 08-3425

Deposit Account Name Human Genome Sciences, Inc.

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	420	2252	210
1253	950	2253	475
1254	1,480	2254	740
1255	2,010	2255	1,005
1401	330	2401	165
1402	330	2402	165
1403	290	2403	145
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,330	2453	665
1501	1,330	2501	665
1502	480	2502	240
1503	640	2503	320
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	770	2809	385
1810	770	2810	385
1801	770	2801	385
1802	900	1802	900
Other fee (specify)			
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$)	0.00

SUBTOTAL (1) (\$ 0.00)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims	21	-21** =	0.00
Independent Claims	6	-6** =	0.00
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code	Fee (\$)	Fee Description
1202	18	2202 9 Claims in excess of 20
1201	86	2201 43 Independent claims in excess of 3
1203	290	2203 145 Multiple dependent claim, if not paid
1204	86	2204 43 ** Reissue independent claims over original patent
1205	18	2205 9 ** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$ 0.00)		

** or number previously paid, if greater; For Reissues, see above

SUBTOTAL (3) (\$ 0.00)

(Complete if applicable)			
Name (Print/Type)	Mark J. Hyman	Registration No. (Attorney/Agent)	46,789
Signature		Date	2/6/2004